

APPLICATION

Name of proposed recipient (Veteran who is to receive the award):

First N	Middle	Las	st
Name of person applying for award (if not the same as above):			
Relationship to recipient:			
Veteran or Applicant Address:_		City	Zip
Phone: ()	one: () Email address:		
Is this diploma being awarded posthumously?			
☐ Yes ☐ No If yes, indi	cate place and dat	e of death:	
PLEASE CHECK APPROPRIATE BOXES BELOW: Recipient left high school before graduation to serve in World War II or the Korean Conflict? ☐ Yes ☐ No			
Recipient served in the U.S. military during World War II or the Korean Conflict and was honorably discharged? □ Yes □ No			
■ Recipient was scheduled to □ Yes □ No	graduate from hig	h school in the year	s 1940 through 1955?
 VERIFICATION OF HONORABLE DISCHARGE: Please provide verification of military service and Honorable Discharge. Discharge papers may be requested from the National Personnel Records Center by completing Standard Form 180. The form may be obtained from the Web at www.nara.gov/regional/mpr.html or by calling (314) 538-2050. 			
Signature: I hereby attest that (insert veteran's name) was honorably discharged from the armed forces of the United States, was scheduled to graduate from high school in the years 1940 through1955, and left high school before graduation to serve in World War II or the Korean Conflict.			
Signed:(Veteran or Applicant)		Date:	
Please provide the name of high school from which a diploma is requested:			
Name of High School			City & State

Please return this form and the discharge papers to the high school from which a diploma is requested. You may apply to the high school the veteran would have graduated from, a high school in the veteran's local community, or to a high school in which the veteran has substantial ties. However, the law does not require high schools to participate in this program.